



The Commission on
Women, Children, Seniors, Equity & Opportunity
CWCSEO
Connecticut General Assembly

**Testimony of The Commission on Women, Children, Seniors, Equity and Opportunity
Submitted to the Finance, Revenue, and Bonding Committee
Wednesday, March 30, 2022 ~ 9:00 AM via Zoom**

Co-Chairs Senator Fonfara and Representative Scanlon, Ranking Members Senator Henri & Representative Cheeseman, and other distinguished members of the Finance, Revenue, and Bonding Committee, we are submitting joint testimony written by Megan Baker, Melvette Hill, and Thomas Nuccio of the Connecticut General Assembly's Commission on Women, Children, Seniors, Equity, and Opportunity (CWCSEO) – and Anna Hallowell, Yale School of Public Health Fellow. We are pleased to submit testimony **in support** of the following bill with some recommendations:

- S.B. No. 487 (RAISED) AN ACT ESTABLISHING THE INFANT AND TODDLER EARLY CARE AND FAMILY SUPPORT INITIATIVE.

Background and Purpose of S.B. 487

One of the key elements of a high-quality education is early intervention. As many as one in four children prior to the age of five are at risk of developmental delays or disabilities. Early intervention allows communities to identify and support these particular needs of children efficiently and cost effectively early on, rather than costly special education services later in K-12 settings. Birth to five programs ultimately help prepare our children for a successful K-12 educational experience with adequate social and emotional growth. “If developmental concerns are caught early, you can help ensure that children receive the extra support they need...”¹ The importance of infant and toddler early care and family support goes far beyond detection of delays or disabilities. Having toddlers in child care centers can positively impact the development of the child.

“Many factors can influence child development, including biology and early experiences with caregivers and peers. Factors like warm and secure relationships, enriching learning opportunities and proper nutrition, exercise, and rest can make a positive difference in healthy child development. On the other hand, poverty, unstable housing parental stress and adverse events such as household dysfunction, maltreatment, abuse or neglect, exposure to alcohol or substance abuse, violence, and/or trauma can have serious negative impact on child development and behavior.”²

The benefits of Connecticut having a much more robust early childcare program are imperative for our state. Senate Bill 487 establishes the Infant and Toddler Early Care and Family Support

¹ [Birth to 5: Watch Me Thrive! \(hhs.gov\)](https://www.hhs.gov/birth-to-5/watch-me-thrive/)

² [Birth to 5: Watch Me Thrive! \(hhs.gov\)](https://www.hhs.gov/birth-to-5/watch-me-thrive/)



Initiative that shall provide grants-in-aid to child care service providers and staffed family child care networks.

Areas of Support for S.B. 487

Child care service providers have been struggling long before the pandemic, though the difficulties faced by this industry have been exacerbated as a result of the pandemic. “Carol O’Donnell, Executive Director of the Connecticut Early Childhood Funder Collaborative, said pay is a key reason the industry is losing workers. The median salary in Connecticut of \$13.45 an hour falls short of Amazon, Target, and other retailers that are paying \$15 an hour or more.”³ Prior to the pandemic, child care centers were short by as many as 50,000 workers for infants and toddlers.⁴ Waterbury and Hartford care facilities were forced to close classrooms for preschool children ages 3 and 4, effectively taking 800 children out of early care.⁵ We believe section 1, subsection (b) that establishes the Infant and Toddler Early Care and Family Support Initiative that shall provide grants-in-aid to child care service providers and staffed family child care networks will provide much needed aid to child care providers across the state, especially those located in cities and towns with income challenged families and early care availability.

In addition, section 1, subsection (d) provides support to further increase capacity of the child care system and availability by encouraging the addition of new family child care providers and child care centers to get licensed and pursue accreditation.

Another significant aspect of section 1 is subsection (e), which ensures a two-generational model of support by requiring the office to provide access to and support for family support services which may include parenting skills support, assistance to help parents complete their education, enroll in a job training program, and find employment as well as learn English. These types of family supports, outside of child care, help the family to move toward economic stability and speak to improving the holistic quality of life for parents and families. Caretakers can not only utilize increased child care spaces, but can also be assisted finishing their education, bridging multi-lingual disparities, and improving areas of workforce insecurity. All of these resources together address compounding factors that place strain on the child care and familial infrastructures:

"We historically have chosen to ignore what the pandemic has laid bare: that access to child care and early education is a social determinant of health.

³ [Future of child care seen as ‘dire’ in Connecticut. Here’s what the state’s largest business group wants done - Hartford Courant](#)

⁴ [Future of child care seen as ‘dire’ in Connecticut. Here’s what the state’s largest business group wants done - Hartford Courant](#)

⁵ [Future of child care seen as ‘dire’ in Connecticut. Here’s what the state’s largest business group wants done - Hartford Courant](#)



For families, access to child care has always been a fundamental economic driver: it promotes employment stability, financial security, and opportunity for economic mobility. In turn, financial security promotes the other protective pillars that uphold and uplift health and wellbeing: housing, nutrition, social connectivity, access to physical and mental health services, and the list goes on. To date, however, we have societally failed to appreciate access to child care's relationship to these more well-known indicators of social, familial, financial, physical, and mental wellbeing—a miscalculation that, in the wake of the pandemic, will have long-lasting and multigenerational consequences.

Indeed, while greater public investment in parent ability to access affordable, high-quality child care has always been a through line to breaking intergenerational cycles of poverty and improving individual, family, and community health, in this moment of crisis, it's critical. Not just for parents—but for their children, too."⁶

Areas of Improvement for S.B. 487

Given that the legislation is intended to bridge equity and accessibility gaps through the provision of infant and toddler spaces in "high-need areas throughout the state," **we recommend that the standards for such initiatives include equal access to these child care providers, preliteracy development that is language inclusive, an anti-bias component to staff qualifications and training, and other specializing training for minority populations to better ensure that the spaces created in these high-need areas are maximally effective.**

Furthermore, the Commission supports this legislation but recognizes **that grants may not be sufficient enough in supporting these critical services.** We believe a comprehensive reform is necessary by fully funding the early child care centers and family child care networks to improve affordability and availability of child care. The Commission has identified many urban and rural child care deserts: areas we see as locations with a lack of or non-existing child care providers.⁷ Children and families in every city rely on and deserve affordable care.

To improve the current state of Connecticut early care we believe that the following state models can if implemented correctly improve the quality, affordability, and accessibility of these services. The Vermont H.171 program is a monumental childcare bill that states that families with incomes <150% FPL now have no co-pay, families with incomes <350% FPL now eligible for subsidy, shift to per-family co-payment model and creates scholarships & loan repayment for childcare providers.⁸ The Pennsylvania Pre-K Counts model allocates state funded school readiness program for all children ages 3 to 4 and offers multiple types of settings, targeted toward at-risk

⁶ <http://info.primarycare.hms.harvard.edu/review/child-care-early-education>

⁷ <https://www.ctcare4kids.com/care-4-kids-program/reports/>

⁸ <https://earlysuccess.org/monumental-child-care-bill-passes-in-vermont-with-full-support-across-party-lines/>



environments where children can attend 180 days per year.⁹ The state of Louisiana has looked at revenue re-allocations by distributing \$20 million from sports betting revenues, and 50% of the NBA Pelicans license plate fund to early childhood education.¹⁰ These are the types of investment our state needs to fully address the inadequacies of early child care in our state.

Working class families either at or above poverty level also experience the inadequacies of early child care accessibility and affordability. Nationally, 21% of households with children are recorded as Asset Limited, Income Constrained, Employed (ALICE); these households have income above the Federal Poverty Level (FPL) but not high enough to afford essentials in the communities where they live."¹¹ In the state of Connecticut, a 2018 report recorded that 38% of households struggled to make ends meet, 11% were living below FPL, and 27% were ALICE.¹² Hardworking families are still unable to afford child care services. Allyx Shiavone, Executive Director of Friends Center for Children in New Haven commented, "Families can't afford [child care services]. Teachers make too little and programs can barely survive."¹³ Programs experienced a little relief through COVID-provided funding, but require sustainable, longitudinal financial allocation.

Lastly, the Commission recommends the explicit inclusion that a certain percentage of the child care grant to be allocated to child care service workers. Section 1, subsection (e) mandates ten percent of the total grant-in-aid to be dedicated to the provision of family support services. Similarly, a portion of the grant should ensure that worker compensation is adequately adjusted in direct proportion to the increase in services. Early childhood teachers are some of the lowest-paid professionals with nearly 40% of child care teachers relying on public assistance at some point in their careers.¹⁴ Just as quality of life for parents and families are important, quality of life for child care workers – who are perhaps parents themselves – is equally as crucial.

The Commission supports this legislation, and emphasizes the areas mentioned to improve this bill.

CWCSEO, is a non-partisan agency within the legislative branch of government. We work to eliminate disparities by identifying opportunities, building connections, and promoting change. Most importantly, we serve the legislature and the people of the state by promoting best practices,

⁹ <https://www.education.pa.gov/Early%20Learning/OCDEL%20Preschool%20Programs/Pages/default.aspx>

¹⁰ <https://earlysuccess.org/innovative-revenue-wins-for-early-care-and-education-in-louisiana/>

¹¹ <https://www.unitedforalice.org/national-overview>

¹² <https://www.unitedforalice.org/state-overview/connecticut>

¹³ <https://www.fox61.com/article/news/local/connecticut-childcare-workers-rally-state-funding/520-bb7ac004-f83b-4acb-8721-022afda4dbf7>

¹⁴ <https://www.americanprogress.org/article/child-care-dollar-go/>



and driving sound public policy via data driven research, recommendations, and a cross-cultural approach to policy innovation.

Thank you,

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